

# Southwest Clean Air Agency

## Outdoor Burning Minimum Civil Penalty Worksheet and Recommendation

NOV No.: \_\_\_\_\_ Date of Violation \_\_\_\_\_

Facility/Name: \_\_\_\_\_ Prop. Owner? (y,n) \_\_\_\_\_

If "no", Prop. Owner Name/Address \_\_\_\_\_

The following procedure shall be employed in making a recommendation for assessment of minimum civil penalties for violations of Agency outdoor burning regulations or permits. Violations involving demonstrable economic benefit to the violator shall include both a gravity and a benefit component. The total civil penalty assessment will be determined by adding these dollar amounts.

### Gravity Criteria

	No (0)	Possibly (1)	Probably (2)	Definitely (3)
1. Were emergency personnel called to respond?				
2. Was it a willful or knowing violation, or should the violator have known the rules?				
3. Was the violator unresponsive to correcting the violation or taking corrective actions?				
4. Did the violator have a history of similar violations?				
5. Did the violator benefit economically from non-compliance?				
6. Did the fire spread in an uncontrolled manner?				
7. Was this violation a non-residential offense?				
8. Were prohibited materials being burned?				
9. Burning in a no-burn area or, burning in a burn area without the necessary permit?				
10. If a permit was obtained, did they fail to abide by the permit conditions?				

Total Gravity Criteria Rating: \_\_\_\_\_

### Gravity Component Minimum Penalty

Rating:	1-6	7-8	9-10	11-12	13+
Penalty:	\$ <u>9065</u>	\$ <u>170425</u>	\$ <u>340250</u>	\$ <u>850625</u>	\$ <u>1290950</u>

## Benefit Component Penalty

If the answer to question #5 in the Table "Gravity Criteria" is "definitely", the estimated dollar amount of economic benefit determined from the current disposal charges and any other costs avoided by non-compliance is \$\_\_\_\_\_ (show or attach calculations\*).

**Comments:**

**Previous NOVs (last 5 years):**

NOV No.	NOV Date	Violation	Civil Penalty

### Penalty Components

Gravity Penalty Component: \_\_\_\_\_

Benefit Penalty Component: \_\_\_\_\_

Evaluator \_\_\_\_\_ Date: \_\_\_\_\_ Civil Penalty Recommendation: \_\_\_\_\_

Evaluator Signature: \_\_\_\_\_

Executive Director Civil Penalty Assessment: \_\_\_\_\_ Signature: \_\_\_\_\_